PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2001								Application or Docket Number  OUNSO/209					
		CLAIMS A	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE			OR	OTHER THAN	
TOTAL CLAIMS						1	RATE		FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			L - เกิเกนร์ 20=		*	Ψ.		X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			- minus 3 =		*			X42=			OR	X84=	
MULTIPLE DEPENDENT CLAIM PI			RESENT					+140=			OR	+280=	
* If the difference in column 1 is			less than zero, enter "0" in column 2				l	TOTAL			OR	TOTAL	<u> </u>
CLAIMS AS AMENDED - PART II									1		•	OTHER	THAN
(Column 1) (Col						(Column 3)	_	SMAL	L E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	¥ i	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 16	Minus	** 2	0	=		X\$ 9=	-		OR	X\$18=	
	Independent	* 2	Minus	*** 5	3	= ( .		X42=			OR	X84=	
<u> </u>	FIRST PRESE	ENTATION OF MI	JUITPLE DEI	PENDEN	CLAIM		'	+140=	-		OR	+280=	7
							L	TOT ADDIT. FI			OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)	,	10011.11				ADD11. 1 CE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	- 1		OR	X\$18≈	
	Independent	*	Minus	***		-		X42=	7		OR	X84=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+280=	
TOTAL ADDIT FEE												TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												AUDIT. I EE	
AMENDMENT C	,	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	1	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	lt	 X\$ 9=	1	1 66	OR	X\$18≃	
	Independent	*	Minus	***		=	<b>]</b>	X42=	+			X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+280≈ TOTAL	
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE											OR	ADDIT. FEE	
		ber Previously Pai					er fou	nd in th	арр	ropriate box	in co	lumn 1.	_